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MARYLAND DEPARTMENT OF DISABILITIES
TESTIMONY AND RESPONSE TO DLS ANALYSIS
FY 2007 BUDGET

Maryland Department of Disabilities FY 07 Budget Testimony

It has been approximately 18 months since the creation of the Maryland Department of Disabilities (MDOD). Since that time the Department established the State Disabilities Plan protocol and disseminated its second State Disabilities Plan (Plan), which outlines a unified vision for disability services across all units of government.

Integral to the second Disabilities Plan, the Department initiated a budget planning process for disability-related programs and submitted the first-ever disability budget proposal to Governor Ehrlich and the Department of Budget and Management. Each request was linked to a series of recommendations that were the outcome of months of public debate. The result is Governor Ehrlich's \$90 million Disability Budget Initiative across all departments in state government. The initiative is directly linked to the 2006 State Disabilities Plan and the MFRs for MDOD in the 2007 budget books.

MDOD also launched an aggressive effort to unify MFR measures and indicators across departments through the State Plan. One will note in the State Budget Books (Volume 1, page 164) that MDOD identifies several pages of MFRs, holding itself accountable to a standard that requires success in other departments' delivery of services to people with disabilities.

The following information delineates much of the activity of the MDOD during the last year -- within the state budget process --throughout MDOD's nine policy domains (Community Integration, Transportation, Education, Children and Families, Employment and Training, Health and Behavioral Health, Housing, Technology and Emergency Preparedness) --through our service programs (Constituent Services/Community Outreach, Attendant Care, Access Maryland, and the MD Technology Assistance Program) -- and the MDOD Commission on Disabilities. As the list illustrates, much was undertaken over the course of the last year.

Budget Process

2007 Statewide Disabilities Budget

Maryland government is focused on gathering baseline data that will enable strategic budgeting benefiting people with disabilities in the years to come. The budget before the legislature this session contains \$90 million in new funding for numerous long-awaited services and supports. If the legislature approves this budget, Marylanders with disabilities will be able to go to work and retain their health insurance under Medicaid through a full Medicaid Buy-In. Hundreds of Marylanders will be able to access services as waiting lists open again to community applicants. **Please reference Attachment 1 to review the full proposal.**

Policy Domains

Community Integration

MDOD is working in partnership with DHMH on various aspects of the CommunityChoice Waiver, including active participation on every subcommittee (Access/Back-up Plan, Care Coordination, CCO Qualifications, Finance, Role of State and Local Agencies, and Quality/Evaluation) to assure an integrated understanding of issues important to people with disabilities. MDOD reaches out continuously to individuals with disabilities, seeking their input regarding consumer satisfaction, quality of life measures and self-direction.

MDOD also partnered with the Department on Aging, serving on numerous committees as they develop MD Access Point, an information and referral network for seniors and people with disabilities. Additionally, MDOD staff worked in partnership with the Department of Health and Mental Hygiene to create a policy for the self-delegation of medication and other informational tools for the Living at Home waiver program. The policy supports consumer direction of attendant care services and complies with the Maryland Board of Nursing regulations permitting participants to self-delegate services without the requirement of a nursing monitor.

Transportation

At the close of 2005, MDOT settled an outstanding lawsuit with MDLC regarding para-transit services. In two years, Maryland went from being considered one of the worst states in the country for para-transit services to one of the very best. MTA's on-time pick up rate went from below 70 percent to over 90 percent during that time. MDOD's partnership with MDOT is perhaps one of the best examples of how MDOD is primed to facilitate the resolution of difficult issues regarding services to people with disabilities. The Consumer Advisory Committee for Accessible Transportation (CACAT) and other consumers with disabilities now provide training to MDOT staff and contractors regarding both fixed route transportation and para-transit, raising consumer satisfaction significantly. MDOD will now interface with the Washington Metropolitan Area Transportation Authority (WMATA) and other areas throughout the state in an effort to expand transportation improvements to citizens with disabilities.

Children and Families

MDOD partnered with DHR and the Child Care Administration leading a comprehensive effort among stakeholders to develop recommendations for inclusive child and after-school care for families with children with disabilities. Following the last legislative session, CCA was transferred to MSDE as a result of HB932. MSDE reported to the legislature in January 2006 its plan for implementing the recommendations from the task force.

Employment and Training

The unemployment rate for Marylanders with disabilities exceeds 50% percent, with those who are employed often receiving wages below those of their non-disabled peers. Many of these individuals have incomes far below Maryland's median income, some as low as 13% for the thousands who rely on SSI. This unemployment crisis triggers dependency and enormous strain on other state-funded services, such as housing, transportation, medical and other related support services. Without a concerted effort to change the way services are rendered, Maryland can expect the high unemployment rates and cycles of dependency to persist.

The State Disabilities Plan provides the blueprint to execute change. MDOD recently concluded a year-long planning process in collaboration with sister agencies, advocacy organizations, service providers, and consumers resulting in the Employment Transformation Steering Committee's comprehensive plan for improving and restructuring employment services in Maryland. Consistent with the group's recommendations, the Governor's multi-faceted budget proposal targets private business, state government and individual needs in an effort to support a comprehensive approach. MDOD's many employment-specific policy initiatives represent important steps toward improving employment outcomes for Marylanders with disabilities.

Education

In partnership with MSDE and MHEC, MDOD created the first-ever transitioning youth pilot for students with learning disabilities graduating from high school who enroll in a degree program at a community college or vocational certification program. Students will be eligible for up to \$2,500 for each of three years to attain an associate's degree or career certification. They must demonstrate a need for time-limited intensive supports that are not typical of what community colleges are required to provide. Also, they must show that without those supports, they would likely be unsuccessful in community college or in career training, and not be eligible for DORS or DDA services. Governor Ehrlich's proposed budget includes \$500,000 for up to 200 students to participate in this joint demonstration initiative.

Behavioral Health

MDOD partnered with the Governor's Office on Children and MHA to write the successful application to SAMHSA procuring for Maryland \$13.5 million dollars in federal funds to transform the state's public mental health system. Maryland was one of only seven states awarded this highly competitive five-year grant designed to assist states in implementing the far-reaching recommendations of the national New Freedom Commission on Mental Health. MDOD will be the primary agency responsible for the development of consumer satisfaction protocol and self-direction initiatives. Additionally, MDOD partnered with MHA and the Mental Health Association of Maryland to develop Maryland's first consumer satisfaction team. This effort will give

people who have experienced mental illness and family members a primary role in quality assurance. Finally, recommendations to implement a self-direction pilot were developed and presented at a national forum.

Housing

MDOD partnered with DHCD to create a Bridge Subsidy Demonstration Project, which will provide subsidies to individuals with disabilities exiting institutions or nursing homes to assist with housing costs until public housing assistance can be put into place. MDOD is also a contributing member of the State Leadership Team coordinating and leveraging long-term support with affordable and accessible housing. MDOD continues to work with DHCD to implement the recommendations of the Governor's Housing Commission targeting housing needs for individuals with disabilities, including people with SSI level of income. For example, DHCD introduced legislation this session that will increase development options creating additional units of affordable and accessible housing.

Technology

MDOD actively engaged with other agencies over the past year to create a format by which the state can utilize information technology to help create an integrated service delivery structure that is characterized by accessibility, a common intake process, and a seamless service delivery process.

Recently, MDOD's Maryland Technology Assistance Program (MD TAP) secured an agreement with the Department of Budget and Management (DBM) to implement the Information Technology Non-Visual Access (NVA) Regulatory Standards within DBM. The proposed FY 2007 Statewide Disabilities Budget includes \$100,000 of new funding targeted to ensure all state agency websites comply with the NVA.

MDOD staff is actively involved in a workgroup comprised of staff from DHMH, DoA, and DHR to develop a template for a uniform online application that could be used by consumers to apply for services delivered by each of the departments. MDOD is prioritizing IT integration in its efforts to integrate services across departments. As a result, MDOD has developed key relationships with other departments in order to ensure that the state maximizes its various efforts to create a formal network of quality data sharing across agencies for the purpose of delivering services that meet the needs of the consumer.

Emergency Preparedness

MDOD held two additional conferences focused on Inclusive Emergency Planning for Individuals with Disabilities in 2005 (one in Montgomery County and one in Baltimore City) attended by more than 200 people. The department was instrumental in developing four Jurisdictional Planning Councils to serve as a local resource for education and training for residents with disabilities or other special needs. Individuals with disabilities

or other special needs are active participants on these councils. MDOD personnel created an appendix, specific to the Maryland Department of Disabilities that is a part of the State Emergency Operations Plan at the Maryland Emergency Management Agency (MEMA). MDOD presented the Maryland Model of inclusive planning at a statewide conference in Delaware and at the USDHS UASI conference in the District of Columbia for the National Capital Region. MDOD developed and disseminated a brochure titled “Emergency and Disaster Preparedness for Individuals with Disabilities” to individuals with disabilities or other special needs, their families and provider agencies.

Regulations Review-All Policy Domains

During the first year of operation, MDOD staff met with representatives from the Division of State Documents and streamlined a process by which to hold departments accountable for providing disability impact statements. MDOD staff presented information at statewide meetings of all departmental regulations coordinators. Follow up sessions occurred with DHMH regulations staff, the largest department with the greatest number of regulations affecting people with disabilities.

MDOD policy staff routinely review all departmental proposed regulations prior to publication in the Maryland Register and evaluates disability impact statements. This process is hampered by the lack of a dedicated Assistant Attorney General; however, one is assigned by the OAG from time to time based on need. The Maryland Register is also routinely reviewed for relevant proposals. The Secretary and Deputy met with various Assistant AGs of the Attorney General’s Office on multiple occasions to discuss ways in which to improve this process. The MDOD statute intended a much more vibrant process – one which would be overseen by appropriate counsel skilled in disability law and the ADA. However, in the absence of dedicated counsel, MDOD staff use their time and resources to the best of their abilities.

Service Programs

Constituent Services/ Community Outreach

The Constituent Services Program (CSP) provides information, referral, resource listings and assistance to individuals with disabilities, their families and caregivers on a variety of issues, including employment, housing, transportation, education and benefits. Constituent Service Coordinators believe individuals with disabilities are best served when allowed to make informed choices throughout every level of the service delivery process. This past year, CSP staff responded to more than 400 constituent requests via telephone, letter and email. Constituent Service Coordinators also staffed MDOD exhibit booths at the World of Possibilities Expo, Raising the Bar Employment Conference, the Maryland Municipal League and the Maryland Association of Counties conferences. As a result of our community outreach, 525 people were added to our distribution list and now receive the Department’s Monthly Update, press releases, legislative updates and other information of interest to the disability community.

In addition to the CSP staff, other MDOD personnel, including the Secretary and Deputy Secretary, routinely engage in community outreach and public speaking engagements. Thousands of people have heard presentations regarding a host of disability related issues. Staff routinely meets with various advocacy and consumer groups and sits on multiple task forces and work groups.

MDOD sponsored several statewide events, including two lecture series highlighting speakers with disabilities with interesting jobs and the Extreme Adaptive Sports Exposition hosted in partnership with the Baltimore City Recreation and Parks Department. In December 2004 and December 2005, a community organization supporting people with disabilities has been selected as the beneficiary of a holiday outreach event by MDOD staff. This year, MDOD partnered with DBED and the Maryland Developmental Disabilities Council to collect more than 1,100 articles of warmth (hats, scarves, blankets, gloves), which were donated to two organizations.

Access Maryland

Consistent with the mission of the Department, the Access Maryland Program funds projects that help increase or provide access to government and state-owned facilities for people with disabilities. As a result of this program, the State is both reducing its liability for non-compliance with federal accessibility regulations mandated by the Americans with Disabilities Act and increasing opportunities for the public to benefit from State programs, services and employment opportunities.

A review of the MFR data combined with observations made as a result of the capital budgeting process reveals that the type of projects funded have become larger and more complex. The program focus in recent years has moved beyond primary access and begun to address more sophisticated needs of people with mobility impairments and those with sensory impairments. Modifications now range from basic access to accessible elevator controls, room identification and directional signage, visual fire alarms and other accommodations.

Attendant Care Program

The Office of Personal Assistance Services was transferred from DHR at the end of FY 2005 – the Living at Home Waiver was absorbed by Medicaid and the Attendant Care Program was moved to MDOD. The Attendant Care Program provides grants to individuals with disabilities to pay for attendant care at home, in the workplace or to attend college. Nearly half of the individuals in the program are working, seeking employment or attending an institution of higher learning. The Attendant Care Program served more than 120 individuals in FY 2006.

MD TAP/ATGLP Programs

The Maryland Technology Assistance Program works to establish a statewide, consumer response system for the delivery of technology related assistance to individuals with disabilities under the Assistive Technology Act of 1998. MD TAP provides numerous services, including the Assistive Technology Guaranteed Loan Program, established through legislation, which enables people to obtain a low-interest loan, who might ordinarily be denied under a commercial bank's stringent lending criteria.

MD TAP achieved many key accomplishments over the past year. Recently, staff secured over \$2.6 million in grants (\$2.1 million federal, \$520,000 state and private) to leverage more than \$10 million in additional guaranteed loans to Marylanders with disabilities for at least the next 17 years. Over the past year, 110 loan guarantees have been approved (totaling over \$1.5 million in principal) and staff created a new low-interest loan program to enable Maryland citizens with disabilities to buy equipment they need to telecommute or operate home-based businesses.

In addition, MD TAP has initiated: a partnership with the Department of Health and Mental Hygiene to plan a program to recycle durable medical equipment; established Voice for Freedom, a project to provide communication devices to nursing home residents with disabilities who are seeking to return to the community; and collaborated with nonprofit and governmental partners to inaugurate the Wicomico County Wheelchair Ramp Construction Project, which will build wheelchair ramps for a fraction of the market price.

Commission on Disabilities

The Maryland Commission on Disabilities serves as an advisory body to the MDOD. Appointed by the Governor, this diverse group of individuals with disabilities and other stakeholders is a robust catalyst to the Department. The full Commission meets every other month and committees spearhead complex issues. The next year will find the Commission hosting listening sessions around the state, and providing greater outreach for the work of the Department. The Commission is also responsible for components of the State Disabilities Plan.

Challenges Ahead

MDOD is aggressively putting a foundation in place to secure the way in which Maryland provides, evaluates and plans for disability services. Maryland must be diligent in its effort to be accountable to the citizens supported by disability programs. The Maryland Department of Disabilities is focused, primed and moving quickly to provide the necessary structure to future growth, supports and accountability through measuring performance.

**Response to DLS Analysis
FY 2007 Budget**

1. **Along with the creation of new measures, the department decided to stop using the goal of making State services for persons with disabilities more efficient, effective, and less expensive as a performance measure. The Department should comment on why this goal was stopped. The Department should explain how it plans to measure efficiency, effectiveness and increased cost reductions in the absence of this goal.**

Response:

The Department continues to coordinate State services for people with disabilities to make them more efficient and cost effective. The available measures included in last year's MFR under this goal were primarily process or output measures rather than outcomes. MDOD policy staff and administrators decided to drop the previous Goal 1 and have the Department's 2005 Annual Progress Report and the 2006 State Disabilities Plan, both submitted to Governor and Legislature, speak to these efforts and accomplishments. The Secretary will address those items in her testimony.

MDOD is working to coordinate state efforts to improve efficiency and cost effectiveness of state services through the state plan with multiple domains, strategies, and specific action steps for each other unit of government. This activity is intended to improve the outcomes in the goals now listed as #2 to #6 and in outcomes in other domains not specifically included in the MFR at this time.

Finally, MDOD submitted its 2005 State Disabilities Annual Progress Analysis to the Governor and Legislature. That report included an implementation evaluation: *how successful the other units of government were in identifying milestones identified for action steps in the unit plans*. In the analysis, MDOD identified in narrative form specific major 2005 highlights in carrying out action steps in the plan and reported that of 67 action steps undertaken by 11 units of government, 62 (or 92 percent) were either completed or in progress in FY 2005. MDOD does not think it is appropriate or necessarily helpful to report *in the MFR* how many state agencies submitted unit plans and unit evaluations or percentages of action steps completed.

2. **The Department should discuss measures already in place and measures that are planned to ensure agency compliance with MDOD's mandates. MDOD should also discuss which mandates the Department is having difficulty operationalizing.**

Response:

During the first year of operation, MDOD staff met with representatives from the Division of State Documents and streamlined a process that holds departments accountable for providing disability impact statements. MDOD staff presented information at statewide meetings of all departmental regulations coordinators. Follow-up sessions occurred with DHMH regulations staff, the largest department with the greatest number of regulations affecting people with disabilities.

MDOD policy staff routinely review all departmental proposed regulations prior to publication in the Maryland Register and evaluate disability impact statements. The Maryland Register routinely is reviewed for relevant proposals. Examples of MDOD's intervention range from instances of modifying language in regulations, replacing the outdated term "handicapped" with "individuals with disabilities," to more substantive dialogue with various departments.

MDOD intended a much more vibrant review process when the department was established. As a result, the Secretary and Deputy met with various Assistant AGs of the Attorney General's Office on multiple occasions to discuss ways in which to improve this process. In the Interim, MDOD staff continues to collaborate with Assistant AGs from other departments and the responsibility of coordinating regulatory review within the department has been assigned to the Director of Research and Evaluation.

3. **MDOD should discuss the ways it plans to measure whether State agencies are ensuring consumer-driven outcomes. Also, the Department should discuss the progress in creating partnerships and work groups.**

Response:

Significant changes have occurred in the last year with regard to improved collaboration among many state partners and to ensure that the state provides services that are based upon consumer-driven outcomes. A partial listing follows.

MDOD enjoys successful achievements through collaboration with:

- MDOT to improve paratransit services
- DHCD to create a bridge subsidy program
- MHA and Governor's Office on Children on the tremendous success in garnering a coveted SAMHSA grant resulting in \$13.5 million in federal funds coming to Maryland to transform the public mental health system
- DBED, DLLR and the Governor's Workforce Investment Board on unified strategies to lower unemployment of people with disabilities
- DHMH and Medicaid on the strategies to implement a full Medicaid Buy-In
- MSDE and DHR on strategies to implement recommendations leading to increased inclusive child care
- The Governor's Office on Homeland Security and MEMA regarding emergency preparedness

Specifically, the analyst requested the ways MDOD plans to measure whether State agencies are ensuring consumer-driven outcomes. MDOD and MHA have an emerging partnership that is strongly reinforced by a mutual commitment to measure and improve consumer-driven outcomes for people with psychiatric disabilities. The Task Force on Mental Health Self-Direction, which was staffed jointly by the MHA and MDOD, issued a report in November 2005 citing ten policy recommendations to improve and advance consumer self-determination in the Maryland mental health system.

The Consumer Quality Team Work Group, chaired by the Mental Health Association of Maryland with participation by MHA, MDOD and a number of other stakeholders, focused on piloting a project designed to employ mental health consumers directly in measuring the quality of outcomes produced by the current provider network in mental health.

The award of the highly competitive five-year \$13.5 million federal Mental Health Transformation Grant, which was awarded to only seven states nationwide and developed under the aegis of the Governor's office, brings together a wide array of state partners to focus on mental health system reform. The grant provides resources to support pilot projects of both Mental Health Self-Direction and the Consumer Quality as referenced above.

During the upcoming year, MDOD is convening a group to recommend a universal definition of self-directed (consumer-directed services) and a Consumer Satisfaction and Quality Outcomes Steering Committee for Long-Term Care. Uniform definitions of quality, its indicators, outcome measures, assessment tools, program requirements and consumer

monitoring policy for all services to individuals with disabilities will be developed and implemented including self-directed outcomes. These measures will be incorporated in all service planning. State agencies will report outcomes to the department.

Finally, MDOD will work with the recently created Office for Blindness and Vision Services within DORS to conduct case file reviews. Reviews will focus on the quality of services rendered, types of services rendered and demographics of consumers served for the purpose of assessing service delivery patterns, performance and quality assurance. The review team will be comprised of staff from MDOD and DORS, an appointee from the State Rehabilitation Council and blind consumers.

4. **The Department should comment on its long-term vision and goals, including whether it intends to or is considering a policy to consolidate and administer more of the State's disability programs. Included in this discussion should be commentary about benefits and costs of program consolidation.**

Response:

MDOD believes that any administrative restructuring or programmatic changes should only occur if state government can demonstrate that the changes would measurably improve services. Guided by this principle, MDOD is focusing on two priority initiatives during the year ahead which are designed to promote accountability and enhance service quality from the consumer's perspective. Specifically, MDOD will roll out its population indicators to other service domains and develop program specific measures to monitor timeliness of services, consumer satisfaction, quality of life standards and other related indicators.

In addition, MDOD is pursuing an interagency effort aimed at reforming long-term care services—an effort that will promote quality and community integration while also streamlining services and reducing fragmentation when possible. All recommendations from this effort will be founded on solid data, outcome measures, extensive input from all stakeholders and will be developed within a fiscally responsible framework. MDOD opts not to preempt the recommendations of this effort, believing that any administrative changes impacting long-term care programs are best made after a considered, transparent and thorough process.

Governor Ehrlich's Disability Budget Initiatives Community Integration

Living At Home Waiver – \$2,000,000 (DHMH)

Sixty-six people will be able to move from the registry to receiving services with this funding after several years of being frozen. Services prevent nursing home placement.

Developmental Disabilities Waiting List Initiative – \$10,000,000 (DHMH - DDA)

This amount allows DDA to serve an additional 1,348 people with developmental disabilities and their families in FY 07 from the waiting list in residential, supported employment, family and individual support services. 2,637 (inclusive of the 1,348) additional people will receive resource coordination.

Developmental Disabilities Emergency Funding - \$2,698,691 (DHMH)

This amount funds emergency services for 154 people (70 residential, 70 day, 14 ISS) with the most serious need for immediate support.

Wrap-Around, Respite, and Family Networks - \$3,800,000 (GOC)

Will provide expanded wrap-around services for children with intensive psychiatric needs and improved local access to services through the creation of family navigators.

Other Children's Services - \$4,080,000 (MSDE)

These will benefit children and families with increased service levels under Maryland's autism waiver, a newly created autism pilot program. These include Child Care Resource and Referral Network - \$750,000; Early Childhood Mental Health - 1,875,000; Autism Waiver – \$1,000,000; Autism demonstration pilot for early screening and diagnosis – \$455,000.

Special Olympics - \$200,000 (DHMH)

This will allow 400 more athletes to participate in summer games, provide free health screening to 5,000 athletes via community Medfests, and assure criminal background screening of 2,000 volunteers working directly with athletes.

DDA Wage Initiative - \$16,239,575 (DHMH)

Represents 5th installment of effort to bring the wages of community direct support workers in line with those paid by state in state residential centers.

Community Mental Health Providers - \$9,255,000 (DHMH - MHA)

Represents a 4 percent cost of living adjustment overall to be dispersed to community providers of psychiatric rehabilitation, supported employment, therapy and more.

Wage increases for private duty nurses in Medicaid programs - \$8,680,000 (DHMH)

More than 2,000 private duty nurses (including those in REM programs) will receive an increase in hourly rates of reimbursement easing the shortage of nurses in these programs.

Wage increases for shift home health care workers - \$216,000 (DHMH)

Thirty-five workers in the children's model waiver will receive increases in the hourly rates of reimbursement easing the shortage of these critical workers.

Medicaid Personal Care Program – \$2,084,000 (DHMH - Medicaid)

Governor Ehrlich provided the first rate increase since 1982 to over 3,000 personal care workers during the last legislative session. These funds allow an additional 10% increase to workers paid \$11 per 2-hour visit to \$12.

Housing Bridge Subsidies - \$700,000 Federal Funds (DHCD)

Bridge subsidies were one of the eight recommendations of the Governor's Housing Commission. The funds will allow the continuation of 75 to 100 people to receive assistance in getting housing as they exit a nursing home with SSI income levels.

DDA Transportation supplement - \$1,000,000 (DHMH)

These funds will offset increased costs incurred transporting people with disabilities.

MH and Substance Abuse - \$670,160 General Fund (DHMH)

These funds will be used to treat inmates with dual diagnoses of substance abuse and mental illness.

Non-visual access accommodation for State websites - \$100,000 (DBM and MDOD)

Will focus on making state websites compliant for non-visual accessibility.

Transportation: Para-transit - \$2,050,000 (MDOT – MTA)

Funds will be used to hire 15 contractual positions to facilitate better customer service at the call center.

MTA capital program – \$6,300,000 (MDOT – MTA)

Funds will be used to purchase new mobility buses and a new centralized mobility center.

Governor Ehrlich's Disability Budget Initiatives Employment and Training

Medicaid Buy-In – \$10.6 million (*DHMH*)

Maryland will fully implement a Medicaid Buy-In as part of Maryland's state Medicaid Plan. The program will serve about 1,542 initially.

Transitioning Youth - \$7,689,340 (*DHMH - DDA*)

497 students leaving special education will receive services in supported employment or vocational training.

Attendant Care Program - \$335,000 (*MDOD*)

These funds will serve 44 additional people on the waiting list. This program assists people with disabilities to be employed or go to school who, without a personal attendant, would not be able to do so.

Traumatic Brain Injury Re-Employment Initiative - \$1 million (*MSDE – DORS*)

This will expand employment rehabilitation services to 50 people with acquired brain injury. This funding will provide up to 320 hours of rehabilitation, re-training, job development and job coaching.

Blind Industries and Services (BISM) of MD - \$150,000 (*MSDE*)

BISM provides intensive rehabilitation and training to individuals who are blind and visually impaired. These funds will be used to provide vocational rehabilitation to individuals who are blind to enter the workforce.

Community College Initiative for Students with Learning Disabilities \$500,000 (*MHEC*)

Funding will serve approximately 200 high school graduates with a learning disability to assist them in the completion of an Associates degree through local community colleges. Youth chosen for this demonstration project will be eligible for up to \$2500 for each of 3 years to attain an AA degree or career certification. They must demonstrate a need for time-limited intensive supports that are not typical of what community colleges are required to provide. Youth must also not be eligible for DORS or DDA services.